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OMB APPROVED
0579-0040
EXP: XX/XXXX

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES

EQUINE IMPORT TESTING SUBMISSION (continuation sheet to VS Form 17-31)

*****THIS FORM MUST BE USED IN CONJUNCTION WITH VS FORM 17-31. DO NOT SUBMIT ALONE*****

15. SAMPLE DATA

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SAMPLE NUMBER	IDENTIFICATION 1 <i>(registered name/barn name)</i>	IDENTIFICATION 2 <i>(RFID#, tattoo, tags, markings, other)</i>	ANIMAL COUNTRY OF ORIGIN CODE	AGE	SEX	BREED	COLOR
A	B	C	D	E	F	G	H